

# Work Order ID 66063

February 3, 2011 11:55:31 AM



Page 1

Item ID: D2182B

Accept



Setup Start



Revision ID:

Stop



Item Name: Rubber Cushion

Start Date: 2/03/11 Start Qty: 300.00



Cust Item ID:

Required Date: 2/11/11 Req'd Qty: 300.00

Customer:

Reference:

Run Start



Approvals: Process Plan: CL Date: 11/02/03 Tooling: \_\_\_\_\_ Date: \_\_\_\_\_

Stop



QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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Draw Nbr	Revision Nbr
D2182	Rev C

100	PURCHASING	0.00							
Purchasing	Memo	0.00							
Purchasing	Issue P/O: <u>13426</u> <input type="checkbox"/> Extrude per Dwg D2182B								
	Possible Supplier: Avid Product								
	P/N: 10173								

CL 11/02/03 350

110	Receive & Inspect for Damage & Mat'l Certs	0.00							
Packaging	Memo	0.00							
Packaging									

10/24/09 350

120	QC6- Inspect dimensions to drawing	0.00							
QC	Memo	0.00							
Quality Control									

Sublot 12

+350  
Q50019

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

Resolution: \_\_\_\_\_ Disposition: \_\_\_\_\_ QA: N/C Closed: \_\_\_\_\_ Date: \_\_\_\_\_

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

**NOTE:** Date & initial all entries

**Work Order ID 66063**

February 3, 2011 11:55:31 AM



Page 2

Item ID: D2182B

Accept



Setup Start



Revision ID:

Stop



Item Name: Rubber Cushion

Start Date: 2/03/11 Start Qty: 300.00



Cust Item ID:

Required Date: 2/11/11 Req'd Qty: 300.00



Customer:

Reference:

Run Start



Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_

Stop



QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Sequence ID/  
Work Center IDOperation  
DescriptionSet Up/  
Run Hours

Tool ID

Tool #

Plan  
CodeAccept  
QtyReject  
QtyReject  
NumberInsp.  
Stamp

130



Packaging

Identify as per dwg & Stock Location: 41/10

0.00

Memo

0.00

Packaging

140



QC

QC21- Final Inspection - Work Order Release

0.00

Memo

0.00

Quality Control

  
11-02-11

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

Resolution: \_\_\_\_\_ Disposition: \_\_\_\_\_ QA: N/C Closed: \_\_\_\_\_ Date: \_\_\_\_\_

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

**NOTE:** Date & initial all entries

# Picklist Print

Page 1

February 3, 2011 11:55:30 AM

Work Order ID: 66063



Parent Item: D2182B



Parent Item Name: Rubber Cushion

Start Date: 2/03/11

Required Date: 2/11/11

Start Qty: 300.00

Required Qty: 300.00

Comments: IPP: B ☐ 98.09.21 ☐ Re-done ☐ KS ☐

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
10173  NEOPRENE CUSHION		Purchased	No			110	Each	0.0000	1 	300		2/4/11	350

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

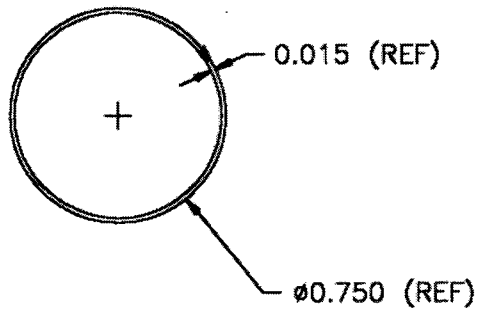
Resolution: \_\_\_\_\_ Disposition: \_\_\_\_\_ QA: N/C Closed: \_\_\_\_\_ Date: \_\_\_\_\_

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

**NOTE:** Date & initial all entries

RELEASED  
97/05/16 DS

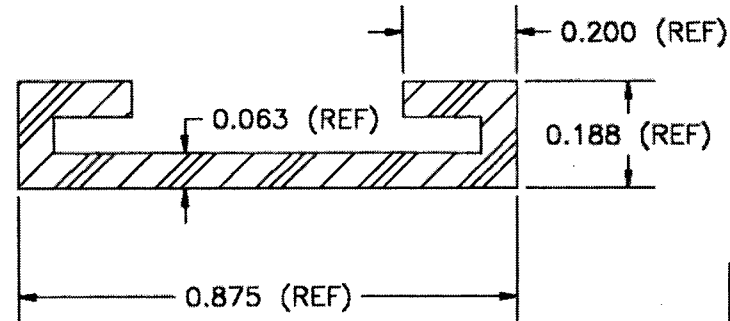
CL 11102103  
W/O: 66063



D2182-050 HEAT SHRINK  
LENGTH

EG: 3.5 LONG: D2182-035  
10 LONG: D2182-100

MATERIAL: RAYCHEM RNF-100-3/4-CL  
HEAT SHRINKABLE INSULATION SLEEVING



W-WHITE  
B-BLACK  
D2182W050 RUBBER CUSHION  
LENGTH

EG: WHITE 3.5 LONG: D2182W035  
BLACK 10 LONG: D2182B100

MATERIAL: SANTOPRENE 101-73  
CONFORMS TO MIL-R-3065

**DART**



PREPARED <i>KE</i>		DART AERO ACCESSORIES INC VICTORIA INTERNATIONAL AIRPORT, CANADA	
CHECKED <i>DM</i>	APPROVED <i>Row</i>	D2182	REV. C
DATE Jan. 6, 1995		TITLE RUBBER CUSHION	SHEET 1 OF 1
B	97:04:07	ADD MATERIAL SPECIFICATION	SCALE
C	97:05:14	ADD HEAT SHRINK	

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

Resolution: \_\_\_\_\_ Disposition: \_\_\_\_\_ QA: N/C Closed: \_\_\_\_\_ Date: \_\_\_\_\_

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

**NOTE:** Date & initial all entries





Dart Aerospace Ltd.  
1270 Aberdeen Street  
Hawkesbury, ON K6A 1K7  
Tel: 613 632 9577  
Fax: 613 632 1053

\*\*\*PO REPRINT\*\*\*

Purchase Order ID PO13426

Purchase Order Date 2/03/11

PO Print Date 2/07/11

Page Number 1 of 1

Order From :

VU-AVI001

AVID PRODUCTS  
P.O. BOX 53555 D  
PHOENIX, AZ 85072-3555  
US

Contact Name

Vendor Phone 602 438 1221

Vendor Fax 602 437 2270

Vendor Account Nbr

Buyer

Chantal Lavoie

Requisition Nbr

Tax Resale Nbr 10127-2607

Terms

Net 30

Currency

USD

FOB

Destination-Collect

*REVISED*

Ship To :

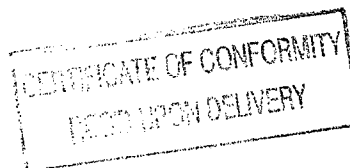
DART AEROSPACE LTD

1270 ABERDEEN  
HAWKESBURY, ON K6A 1K7  
CANADA

Line Nbr	Reference Revision ID Vendor Part Number	Description/ Mfg ID	Req Date/ Taxable	Req. Qty/ Unit of Measure	Ship Method	Unit Price	Extended Price
1	10173	NEOPRENE CUSHION	2/11/11 Yes	350.00 Each	FedEx PI collect	\$1.1000	\$385.00

Special Inst: AS PER DWG D2282 REV. C  
B66063  
AVID P/N: 10173

PO Total: \$385.00



Change Nbr: 2

Change Date: 2/07/11

*CL*

No substitution or deviation without  
consent.  
Certificate of Conformity or Material  
Certification required when applicable

**Avid Products**  
3730 E. Southern Avenue  
Phoenix, AZ 85040  
(602) 438-1221 / Fax (602) 437-2270  
[www.avidproducts.net](http://www.avidproducts.net)

## Shipping List 101367

**Customer No 007422**

**Sales Order Shipper**

**Ship to :**

**DART AEROSPACE LTD**  
**1270 ABERDEEN ST.**  
**HAWKESBURY ON K6A 1K7**  
**Canada**

**Sold to :DART AEROSPACE LTD  
1270 ABERDEEN ST.  
HAWKESBURY ON K6A 1K7  
Canada**

Ship Date	Customer PO	# of Boxes	Weight	Ship VIA	Bill of Lading	FOB
02/07/2011	PO13426	0	0.0000	FEDERAL EXPRESS		COLL
Item	Fac / Part / Rev / Description / Details			Order Quantity	Ship Quantity	
000001	Default <b>Sales Order 120357-00</b> SO Item 001 6004                              Rev 2              U/M FT 6004 SANTOPRENE <b>Customer Part Number:      10173</b>			350.0000	350.0000	



Avid Products  
3730 E. Southern Avenue  
Phoenix, AZ 85040  
(602) 438-1221 / Fax (602) 437-2270  
www.avidproducts.net

REMIT-TO ADDRESS:  
P.O. Box 53555  
Phoenix, AZ 85072-3555

Invoice No 0000123736

Customer 007422

## COMMERCIAL INVOICE

Bill to :

DART AEROSPACE LTD  
1270 ABERDEEN ST.  
HAWKESBURY ON K6A 1K7  
Canada

Sold to :

DART AEROSPACE LTD  
1270 ABERDEEN ST.  
HAWKESBURY ON K6A 1K7  
Canada

Sales Order Fax (613)632-1053

Customer Phone (613)632-9577

Default

Customer PO Number	Invoice Date	Terms	FOB	Ship Via	Salesperson
PO13426	02/07/2011	NET 30	COLLECT	FEDERAL EXPRESS	850
Item	Part / Rev / Description / Details	Quantity	Unit Price	Discount	Extended Price
000010	6004 Rev 2 U/M FT 6004 SANTOPRENE Packing List No/Item No: 101367/000001 Sales Order No: 120357 Customer PO No: PO13426 Serial No.	350.0000	1.10000	0.00	385.00
<b>Made in the USA</b>  "I certify that the goods referenced in this invoice comply with the origin requirements specified for these goods in the North American Free Trade Agreement, and that further processing or assembly in a third country has not occurred subsequent to processing or assembly in the NAFTA region."  <b>SHIPPED TO ADDRESS:</b> DART AEROSPACE LTD 1270 ABERDEEN ST. HAWKESBURY ON K6A 1K7 Canada  Please pay balance due by Wednesday March 9 2011.		Customer Part No: 10173			
		Total Item Price			385.00
		Shipping			0.00
		Sales Tax			0.00
		Total Inv Price			US\$ 385.00

PRINTER COPY



## ***Avid Products***

### **CERTIFICATE OF COMPLIANCE**

This is to certify that the item(s) listed below, shipped on 02/10/2011 Purchase order **PO13426** were manufactured and inspected in accordance with applicable drawings and/or specifications, unless noted herein JOBS PO055029

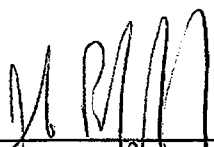
Physical and/or chemical test reports of materials used are on file, subject to examination and substantiate conformance with applicable specification requirements.

QUANTITY SHIPPED  
**350**

PART NUMBER  
**101-73**

DESCRIPTION/SPECIFICATION  
**6004 SANTOPRENE**

8/10/11

  
\_\_\_\_\_  
Shipping Department

02/10/2011

\_\_\_\_\_  
Date

3730 East Southern Avenue Phoenix, Arizona 85040

Phone 602-438-1221 Fax 602-437-2270

[www.2mfg.com/avid](http://www.2mfg.com/avid)